

Substitute for form 1449B/PTO				<i>Complete if Known</i>	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT				<i>Application Number</i>	10/630,223
				<i>Filing Date</i>	July 20, 2003
				<i>First Named Inventor</i>	Francis Michon
				<i>Art Unit</i>	1645
				<i>Examiner Name</i>	S. Devi
(Use as many sheets as necessary)					
Sheet	1	of	1	<i>Attorney Docket Number</i>	13564-105038US1

Examiner Signature		Date Considered	
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.

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